

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	HC		09-224-01
O.I.P.E. CLASSIFIER		24	10/4/01
FORMALITY REVIEW	TH	1118	10-19-01

INDEX OF CLAIMS

Rejected	N	Non-elected
Allowed	I	Interference
Canceled	A	Appeal
Restricted	O	Objected

(Through numeral)

Claim	Final	Original	Date
1	10	+	0
2	2	4	14
3	6	0	03
4	1	1	1
5	1	1	1
6	0	0	0
7	1	1	1
8	1	1	1
9	0	0	1
10	1	1	1
11	1	1	1
12	0	0	0
13	1	1	1
14	0	0	0
15	1	1	1
16	1	1	1
17	0	0	0
18	1	1	1
19	0	0	0
20	0	0	0
21	1	1	1
22	0	0	1
23	1	1	1
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37	1	1	1
38	1	1	1
39	0	1	1
40	0	1	1
41	0	1	1
42	1		
43		✓	
44		0	
45		0	
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If more than 150 claims or 10 actions
staple additional sheet here

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